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## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

Application or Docket Number

| CLAIMS AS FILED - PART I<br>(Column 1)                                   |   |   |                             |              | (Column 2)                      |                  |          | SMALL ENTITY TYPE   |                        | OR    | OTHER THAN OR SMALL ENTITY |                        |
|--|---|---|-----------------------------|--------------|---------------------------------|------------------|----------|---------------------|------------------------|-------|----------------------------|------------------------|
| TOTAL CLAIMS   |   |   | 28                          |              |                                 |                  | Γ        | RATE                | FEE                    |       | RATE                       | FEE                    |
| FOR  |   |   | NUMBER FILED                |              | NUMBER EXTRA                    |                  |          | BASIC FEE           | 370.00                 | OR    | BASIC FEE                  | 740.00                 |
| TOTAL CHARGEABLE CLAIMS  |   |   | 9 minus 20=                 |              | * 9                             |                  |          | X\$ 9=              |                        | OR    | X\$18=                     | 162                    |
| INDEPENDENT CLAIMS   |   |   | <b>∜</b> minus 3 =          |              | *                               |                  |          | X42=                |                        | OR    | X84=                       | 84                     |
| MULTIPLE DEPENDENT CLAIM PRESENT   |   |   |                             |              |                                 |                  |          | +140=               |                        | OR    | +280=                      |                        |
| * If the difference in column 1 is less than zero, enter "0" in column 2 |   |   |                             |              |                                 |                  | L        | TOTAL               |                        | OR    | TOTAL                      | <b>2</b>               |
| CLAIMS AS AMENDED - PART II  |   |   |                             |              |                                 |                  |          | SMALL ENTITY        |                        |       | OTHER THAN<br>SMALL ENTITY |                        |
|  | E-Alexandra   | (Column 1)                                | G. H. COCK, The College     |              | mn 2)<br>HEST                   | (Column 3)       | 1 -      | SMALL               |                        | OR    | SMALL                      |                        |
| AMENDMENT A  |   | REMAINING<br>AFTER<br>AMENDMENT           |                             | NUM<br>PREVI | MBER<br>OUSLY<br>FOR            | PRESENT<br>EXTRA |          | RATE                | ADDI-<br>TIONAL<br>FEE |       | RATE                       | ADDI-<br>TIONAL<br>FEE |
|  | Total   | *   | Minus                       | **           |                                 | =                |          | X\$ 9=              |                        | OR    | X\$18=                     |                        |
|  | Independent   | * NTATION OF M                            | Minus ***  JLTIPLE DEPENDEN |              | IT CLAIM                        | ]=               |          | X42=                |                        | OR    | X84=                       |                        |
| <u> </u>   | T I I I I I I I I I I I I I I I I I I I   |   | 02111 22 021                | LINDLIN      |                                 |                  | <b>'</b> | +140=.              | ,                      | OR    | +280=                      |                        |
|  |   |   |                             |              |                                 |                  |          | TOTAL<br>ADDIT. FEE |                        | OR    | TOTAL<br>ADDIT. FEE        |                        |
| (Column 1) (Column 2) (Column 3)   |   |   |                             |              |                                 |                  |          |                     |                        |       |                            |                        |
| AMENDMENT B  |   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                             | NUM<br>PREV  | HEST<br>MBER<br>HOUSLY<br>D FOR | PRESENT<br>EXTRA |          | RATE                | ADDI-<br>TIONAL<br>FEE |       | RATE                       | ADDI-<br>TIONAL<br>FEE |
|  | Total   | *   | Minus                       | **           |                                 | = '              |          | X\$ 9=              |                        | OR    | X\$18=                     |                        |
| AME  | Independent   | *   | Minus                       | ***          | IT CLAIM                        | =                | -        | X42=                |                        | OR    | X84=                       |                        |
| <u> </u>   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  |   |                             |              |                                 |                  |          |                     |                        | OR    | +280=                      |                        |
|  |   |   |                             |              |                                 |                  |          | TOTAL ADDIT. FEE    |                        | OR    | TOTAL<br>ADDIT, FEE        |                        |
| (Column 1) (Column 2) (Column 3)   |   |   |                             |              |                                 |                  |          |                     |                        |       |                            |                        |
| AMENDMENT C  |   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                             | NUI<br>PREV  | HEST<br>MBER<br>YOUSLY<br>D FOR | PRESENT<br>EXTRA |          | RATE                | ADDI-<br>TIONAL<br>FEE |       | RATE                       | ADDI-<br>TIONAL<br>FEE |
|  | Total   | *   | Minus                       | **           |                                 | =                |          | X\$ 9=              | . ·                    | OR    | · X\$18=                   |                        |
| AME  | Independent   | * ENTATION OF M                           | Minus                       | ***          | AT CLAIM                        | =                | ┨┠       | X42=                |                        | OR    | X84=                       |                        |
| ╚  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +140=  |   |                             |              |                                 |                  |          |                     | OR                     | +280= |                            |                        |
|  |   | ımn 1 is less than<br>ımber Previously F  |                             |              |                                 |                  | D."      | TOTAL               |                        | OR    | TOTAL                      |                        |
|  | ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. |   |                             |              |                                 |                  |          |                     |                        |       |                            |                        |